| I  | РАТ  | ENT ADDLIC  | CATION                              |  | 'Datiala Tion of the Control of the |  |                             |                    | A                            | Application or Pocket Number |                     |  |  |
|--|--|---|-------------------------------------|--|---|--|-----------------------------|--------------------|------------------------------|------------------------------|---------------------|--|--|
|  | , 7,11                                       | -ייו אררנונ   | Effective                           | ERM<br>R 20  | RMINATION RECORD  |  |                             |                    | The section of Access Number |                              |                     |  |  |
| Effective December 8                                       |  |   |                                     |  |   | AM and am Adversarian                  |                             |                    |                              | Alinoten Atmand              |                     |  |  |
|  |  | I Na  | National Stage Processing Small Ent |  |   |  | TITY National State Process |                    |                              |                              |                     |  |  |
| _  |  |   | (0                                  | Column 1)  |   | 130 805 8421                           | ι.                          | TYPE               |                              | O                            | RAZZISON AZ         | E THE ITY  |  |
| U  | .S. NATIONA                                  | L STAGE FEES  | 3                                   |  |   |  | 1                           | RATE               | FEE                          | 7                            | 703 365-84<br>RATE  | FE   |  |
| 3/   | ASIC FEE                                     |   | SMALL                               | ALL ENT. = \$ 150  |   | RGE ENT. = \$ 300                      | 1                           | BASIC FEE          | 157                          | 7.                           | R BASIC FEE         | <del>                                     </del> |  |
| EXAMINATION FEE  |  |   |                                     | Satisfies PCT Article 33(1)-<br>(4) = \$50/\$100                     |   | other situations = \$ 100 / \$ 200     |                             | EXAM. FEE          | IDC                          | 5                            | EXAM. FEE           |  |  |
| SEARCH FEE   |  |   | ALL oth                             | U.S. is ISA = \$50 / \$100<br>ALL other countries =<br>\$200 / \$400 |   | All other situations = \$ 250 / \$ 500 |                             | SEARCH FEE         |                              | 1                            | SEARCH FEE          | -  |  |
| EE FOR EXTRA SPEC. PGS.                                    |  |   |                                     | minus 100 =  |   | / 50 =                                 |                             | X \$ 125 =         |                              | 1                            | X \$ 250 =          |  |  |
| OTAL CHARGEABLE CLAIMS                                     |  |   | 104                                 | Cminus 20 =  | •.  | 84                                     |                             | X \$ 25 =          | 2/00                         | OF                           | <b> </b>            | <del>                                     </del> |  |
| (C   | EPENDENT (                                   | CLAIMS  | 1                                   | / minus 3 = ,  |   |  |                             | X \$ 100 =         |                              | -<br>OF                      | <b> </b>            |  |  |
| ULTIPLE DEPENDENT CLAIM PRESENT                            |  |   |                                     |  |   |  | Ì                           | + \$ 180 =         |                              | OF                           | ļ                   |  |  |
| If the difference in column 1 is less than zero, enter "0" |  |   |                                     |  |   | olumn 2                                | L                           | TOTAL              | 255                          | NOR                          | L                   | <del> </del> -                                   |  |
|  |  | (Column 1) CLAIMS REMAINING   |                                     | (Colum<br>HIGHE<br>NUMBI   | n 2)<br>ST  | (Column 3)                             | Γ                           | SMALL              | ADDI-                        | OR<br>]                      | OTHER<br>SMALL      |  |  |
|  |  | AFTER<br>AMENDMENT  |                                     | PREVIOL<br>PAID F  | ISLY  | EXTRA                                  |                             | RATE               | TIONAL<br>FEE                | ļ.                           | RATE                | TIONAL   |  |
|  | Total  | •   | Minus                               | **   |   | =                                      | ſ                           | X \$ 25 =          |                              | OR                           | X \$ 50 =           |  |  |
|  | Independent                                  | <u>                                     </u>                          | Minus                               | ***  |   | =                                      |                             | X \$ 100 =         |                              | OR                           | X \$ 200 =          | <del> </del>                                     |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CL  |   |                                     | AIM  |   |  | + \$ 180 =                  |                    | OR                           | + \$ 360 =                   |                     |  |  |
|  |  |   |                                     |  |   |  | T                           | OTAL ADDIT.<br>FEE | _                            | ĢR                           | TOTAL ADDIT.<br>FEE |  |  |
|  |  | (Column 1)  |                                     | (Column  | 2)  | (Column 3)                             |                             |                    |                              |                              |                     |  |  |
|  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                             |                                     | HIGHES<br>NUMBEI<br>PREVIOUS<br>PAID FO                              | R<br>SLY  | PRESENT<br>EXTRA                       |                             | RATE               | ADDI-<br>TIONAL<br>FEE       |                              | RATE                | ADDI-<br>TIONAL<br>FEE                           |  |
| ľ  | Fotal  | •   | Minus                               | **   |   | =                                      |                             | X \$ 25 =          |                              | OR                           | X \$ 50 =           |  |  |
|  | ndependent                                   | *   | Minus                               | ***  |   | =                                      | 5                           | (\$ 100 =          |                              | OR                           | X \$ 200 =          |  |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA |   |                                     |  | VIM .   |  |                             | \$ 180 =           |                              | OR                           | +\$360 =            |  |  |
|  |  |   |                                     |  |   | ·                                      | TO                          | TAL ADDIT.<br>FEE  |                              | OR                           | TOTAL ADDIT.<br>FEE |  |  |
|  | the entry in column the "Highest Nur         | mn 1 is less than the<br>nber Previously Paid<br>nber Previously Paid | entry in column                     | n 2, write "0" in co   | lumn 3  | enter *20*                             | L.                          | TAL ADDIT.         | •                            | Ł                            | TOTAL ADDIT.        |  |  |

The "Highest Number Previously Pald For" (Total or Independent) is the highest number found in the appropriate box in column 1.